Board of Trustees, Community Colle Peninsula College	ege District # 1 -				
1. Board/Commission Name (B/C)		2. Name B/C	B/C reported under in 2001 or Unchanged ⊠		
Same 1967			5	17 regular, 0 special	
3. Agency to which B/C reports		4. Year B/C was 5. Number of established 5. Number of members 6. Number of members last biennium			
7. Summary: Primary Responsibilities: 1) operate the community college in the district facilities; 5) establish fees and charges; 6) pres Technical and Community College Education a administration of the District.	scribe courses of study; 7)	grant degrees, diplo	omas; 8) enforce rules	and regulations of the State Board for	
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs				
2001-2003 Biennium Actual	\$17,414	G.F. State; A	1		
2003-2005 Biennium Estimate	\$12,000	G.F. State; A			
9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) reduce the opportunity for local participation in the governance of the District and College; also, reassignment would require a change in the state law 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: Governor of the State of Washington 12. Appointing Authority: RCW 28B.50.100 13. Is Senate confirmation required? Yes \(\sum \) No					
14. Does Board/Commission have subpoen ☐ Vos ☑ No.	a powers?	15		member compensation class	
 Yes ⋈ No 16. Required Representation: The Governor shall give consideration to geogr 17. Federal or other mandates: NA 19. Certification: I hereby certify via electronic 	·	18.	Other existing orgal could satisfy the m NA	nd professions, and ethnic groups. nizations state, local or private, which nandates listed in number 17:	
Dr. Thomas A. Keegan, President			502 E. Lauridsen Blvd	•	
Name and Title		WA 98362 Address		Phone	

Peninsula Work Release Community	Advisory Board				
1. Board/Commission Name (B/C)	2. Name B/C reported under in 2001 or Unchanged 🖂				
Department of Corrections	1996	12	8		
3. Agency to which B/C reports	4. Ye	ar B/C was tablished	5. Number of members	6. Number of meetings last biennium	
7. Summary: Primary Responsibilities: This group meets quarterly to address issues	of concern and to en	hance communicat	ion between the facility and t	he community.	
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Accou	Sources of fund sources, e.g., G.F. Stunt, etc. appropriated or "N" if non-	ate, State Building Code	
2001-2003 Biennium Actual	-0-				
2003-2005 Biennium Estimate	-0-				
9. Expected consequences if Board/Commiss transferred to another agency (specify), or c)		l d and responsibili	ties: a) were assigned to ex	kisting/additional staff, b) were	
a) No similar resources available	b) No similar re	esources available	•	cility would lose contact with the numbers.	
10. Legal authorization: State Constitution Ar	ticle, RCW, WAC o	r EO	11. Legal Authorization i	S:	
RCW 72.09.050 (Secretary's Authority)			☐ Specific ☐ General		
12. Appointing Authority: Secretary, Departme	ent of Corrections		13. Is Senate confirmation	on required?	
			☐ Yes ⊠ No		
14. Does Board/Commission have subpoena	powers?		15. Board/Commission n	nember compensation class	
☐ Yes ⊠ No			⊠ one □ two □ three	e 🗌 four	
16. Required Representation:					
Department of Corrections staff, Allvest L.L.C. an	d local community m	nembers.			
17. Federal or other mandates: None.			18. Other existing organi could satisfy the ma None.	zations state, local or private, which ndates listed in number 17:	
19. Certification:					
I hereby certify via electronic so	ubmittal that the abo	ove information is	complete and correct to the	best of my knowledge.	
Patria N. Robinson-Martin		Post Office Box	41101		
Chief of Staff Name and Title	07/23/2003 Dat e	Olympia, Washi Address	ngton 98504-1101	360-753-0896 Phon e	
4114 11410	Duit	, 1441 055		1 110110	

Penitentiary Community Advisory C	committee			
1. Board/Commission Name (B/C)		2. Name B/	C reported under in 2001 or	Unchanged 🗵
Department of Corrections		1989	. 8	3
3. Agency to which B/C reports	4. Year estab	B/C was blished	Number of members	Number of meetings last biennium
7. Summary: Primary Responsibilities: The Washington State Penitentiary Commun Penitentiary in addressing, discussing and e				
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs			
2001-2003 Biennium Actual	100.00	General Fund		
2003-2005 Biennium Estimate	100.00	General Fund	- State A	
9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) No similar resources available b) No similar resources available c) Loss of connection with local community and vital source of feedback on various corrections and penitentiary issues. 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: RCW 72.09.050 (Secretary's Authority) □ Specific ☑ General				
12. Appointing Authority: Secretary, Departr	nent of Corrections		3. Is Senate confirmation re ☐ Yes ⊠ No	equired?
14. Does Board/Commission have subpoen	a powers?	1	5. Board/Commission men	nber compensation class
☐ Yes ☒ No			☑ one ☐ two ☐ three ☐] four
16. Required Representation:				
Local community members and staff from the V	Vashington State Peniten	tiary.		
 17. Federal or other mandates: None. 18. Other existing organizations state, local or privation could satisfy the mandates listed in number 17 None. 			ons state, local or private, which ates listed in number 17:	
19. Certification:				
I hereby certify via electronic	submittal that the above	e information is con	nplete and correct to the bes	st of my knowledge.
Patria N. Robinson-Martin Chief of Staff	07-23-2003	Post Office Box 411 Olympia, Washingto		360-753-0896
Name and Title	Date	Address		Phone

Pers	sonnel Appeals Board					
1. Bo	oard/Commission Name (B/C)		2. Name B/C reported under in 2001 or Unchanged			
Same			1981	3	98	
3. Aç	gency to which B/C reports	4. Year B establi		5. Number member		
Cond	Immary: Primary Responsibilities: luct hearings and decide appeals filed by utions	merit system (civil service)	employees of state age	ncies and clas	sified employees of higher education	
	stimated Operating Costs pards/Commissions Only)	Total Costs				
2001-	2003 Biennium Actual	1,733,610	Personnel Services			
			A			
2003-	2005 Biennium Estimate	1,742,000	Personnel Services A	Account		
	spected consequences if Board/Commi ferred to another agency (specify), or o		d responsibilities: a) w	ere assigned	to existing/additional staff, b) were	
a)	Hearings Examiners would need to be added to staff to conduct hearings and decide appeals.		ice reform legislation ns to Personnel Resourc	c) ees	Right of merit system employees to appe disciplinary actions and rule violations would be denied if no forum existed for	
	Credibility and accountability of board appointed by Governor may be deminished.		Transition may slow resolution of appeals for a short period, but process would recover over time.		hearing and deciding appeals. Fair and efficient administration of the merit employment system would be affected.	
	No significant cost savings.	No overall savinç costs.	gs as PRB would incur s	imilar	Savings equal to agency budget.	
10. L	egal authorization: State Constitution	Article, RCW, WAC or EO	11. Le	gal Authoriza	tion is:	
	Chapter 41.64 RCW		⊠ Spe	ecific 🗌 Gen	eral	
12. <i>A</i>	Appointing Authority: Governor		13. Is 5	Senate confir	mation required?	
			⊠ Yes	S 🗌 No		
14. C	oes Board/Commission have subpoen	na powers?	15. Bo	ard/Commiss	sion member compensation class	
⊠ Y	es 🗌 No		one	e 🗌 two 🔲	three four	
	Required Representation: ons appointed to the board shall be qualified	ed by experience and traini	ng in the field of adminis	strative proced	lures and merit principles. RCW 41.64.010.	
17. F	ederal or other mandates:		18. Oth	ner existing o	rganizations state, local or private, which ne mandates listed in number 17:	
	None		N			
19. C	Tertification: I hereby certify via electron	nic submittal that the above	e information is comple	ete and correc	et to the best of my knowledge.	
	Bennett, Executive Secretary		O Box 40911, Olympia,	WA 98504	360 664-0373	
Name	e and Title	Date A	ddress		Phone	

Washington Personnel Resources E	Board	Unchanged		
1. Board/Commission Name (B/C) 2. Name B/C reported under in 2001 or Unchanged ☐				or Unchanged 🖂
Department of Personnel 1961			3	20
3. Agency to which B/C reports	4. Year E establ		Number of members	6. Number of meetings last biennium
7. Summary: Primary Responsibilities: To establish and govern a human resources syincludes adopting rules for appointment, prome employees. It also includes arbitration and me	otion, transfer, layoff, recru	itment, retention, classificati	on, pay, removal, a	ninistration. This responsibility and discipline of civil service
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	5) Enter fund sourc Account, etc. 2) "A" if appropriated	•	e, State Building Code
2001-2003 Biennium Actual	62000	Personnel Services Re		
2003-2005 Biennium Estimate	52000	Personnel Services Re	volving Fund/A	
Expected consequences if Board/Comm transferred to another agency (specify), or	। ission were abolished an c) were dropped.	d responsibilities: a) were	assigned to exist	ting/additional staff, b) were
 The tradition and strength of citizen participation and the neutrality of a third party would be eliminated. 		merit principles require		watch dog" role of the citizens ning the hiring of employees would be
10. Legal authorization: State Constitution	Article, RCW, WAC or EC	D 11. Legal	Authorization is:	
RCW 41.06.100		Specif	ic 🗌 General	
12. Appointing Authority: Governor		13. Is Ser	nate confirmation	required?
		⊠ Yes □	No	
14. Does Board/Commission have subpoer	na powers?	15. Board	I/Commission me	mber compensation class
⊠ Yes □ No		one [☐ two ☐ three	⊠ four
16. Required Representation:				
Each member must have demonstrated an inte within a year prior to appointment, nor become			loyment state, not	be an officer with a political party
17. Federal or other mandates: None		18. Other could None	I satisfy the mand	tions state, local or private, which lates listed in number 17:
19. Certification: <i>I hereby certify via electron</i>	nic submittal that the abov	ve information is complete o	and correct to the	best of my knowledge.
Eugene Matt, Director, Dept. of Personnel	July 25, 2003 F	PO Box 47500, Olympia WA	98504	664-6350
Name and Title		Address		Phone

Pesticide Advisory Board						
Board/Commission Name (B/C)		2. Name E	B/C reported under in 2001 or	Unchanged 🛛		
Department of Agriculture		1961	20	9		
3. Agency to which B/C reports		B/C was blished	5. Number of members	Number of meetings last biennium		
7. Summary: Primary Responsibilities: The Board advises the director of Agriculture of state of Washington.	on any or all problems rela	ating to the use and	d application of pesticides in the	е		
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs					
2001-2003 Biennium Actual	\$12,311	1) 36% State General Fund; 12% Toxics; 30% Pesticide Reg. Local Feed Reg. Local; 10%Fertilizer Reg. Local; 1% External Affairs Loc ALEA 2) A				
2003-2005 Biennium Estimate	\$12,500	2,500 1) 38% State General; 12% Toxics; 30% Pesticide Reg. Local; 10% Reg. Local; 10% Fertilizer Reg. Local 2) A				
9. Expected consequences if Board/Comm transferred to another agency (specify), or		' '	es: a) were assigned to existi	ng/additional staff, b) were		
 a) Input from pesticide industry and user groups would decline. b) N/A, creation of the Pesticide Advisory Board was mandated in RCW 17.21.230 to "advise the director [of Agriculture] on any or all problems relating to the use and application of pesticides in the state." 						
10. Legal authorization: State Constitution	Article, RCW, WAC or E	EO	11. Legal Authorization is:			
RCW 17.21.230 Washington Pesticide A	pplication Act		⊠ Specific □ General			
12. Appointing Authority: Director of Agricul	lture		13. Is Senate confirmation re ☐ Yes ☐ No	equired?		
14. Does Board/Commission have subpoer	na powers?		15. Board/Commission member compensation class			
☐ Yes ⊠ No			one two three four			
16. Required Representation: One each: Ground applicator, aerial applicato manager, entomologist, toxicologist, plant path member, agricultural labor representative, hea Fish & Wildlife, Natural Resources, Health, Ec Department of Agriculture. Two each: enviror	nologist, agricultural chem Ith care practitioner in privology, and the assistant d	ical industry memb vate practice; state lirector of the Pesti	per, food processing industry directors of the departments o	f L&I,		
17. Federal or other mandates:			Other existing organizati could satisfy the manda	ons state, local or private, which ates listed in number 17:		
None			None			
19. Certification: <i>I hereby certify via electro</i>	nic submittal that the abo	ove information is	complete and correct to the b	nest of my knowledge.		
Laurie Mauerman, Division Coordinator Name and Title	8/1/03 Dat e	P.O. Box 42560 (Address	Olympia, WA 98504-2560	(360) 902-2012 Phone		

Pesticide Incident Reporting and Tra Review Panel	acking (PIRT)				
1. Board/Commission Name (B/C)	2. Name B/0	C reported under in 20	001 or Unchanged 🗵		
Washington State Department of Health/ Legisl	ature	1990	11	15	
3. Agency to which B/C reports	4. Year estab	B/C was lished	5. Number of members	6. Number of meetings last biennium	
7. Summary: Primary Responsibilities: The PIRT Panel produces an annual report su and Industries, identifes trends for prevention a incidents or issues of unusual complexity and r	ictivities, ensures timely r	eporting and adequa	ate regulations to prote		
8. Estimated Operating Costs	Total			of Funds	
(Boards/Commissions Only)	Costs	7) Enter fur Account,		State, State Building Code	
		2) "A" if app	ropriated or "N" if no	n-appropriated	
2001-2003 Biennium Actual	\$95,325	1) GF/State 2) A			
2003-2005 Biennium Estimate	\$98,661	1) GF/State 2) A			
Expected consequences if Board/Commi transferred to another agency (specify), or committee to another agency (specify).			: a) were assigned to	existing/additional staff, b) were	
a) The PIRT Panel annual report is viewed as objective information because it is developed by independent experts on pesticides. Additional resources would be needed to contract with independent research entities to produce the report should the panel be abolished.	chair the panel other state age and Ecology). involve risks to functions were another agency same public he	b) The panel's enabling statue specifies DOH chair the panel with representation from other state agencies (WSDA, L&I, WSFW, and Ecology). Most of the pesticide incidents involve risks to human health. If PIRT functions were transferred to WSDA or another agency, the panel would not have the same public health focus and DOH would loose the FTE and panel funding.			
10. Legal authorization: State Constitution	Article, RCW, WAC or E		1. Legal Authorization		
RCW 70.104.070.090 12. Appointing Authority: Governor/Legislatu	ıre (2)		☑ Specific ☐ Genera 3. Is Senate confirma ☑ Yes ☑ No		
14. Does Board/Commission have subpoen☐ Yes ☒ No	a powers?		5. Board/Commission	n member compensation class ree	
 16. Required Representation: The panel consists of directors, secretaries or designees from the departments of health, labor and industries, agriculture, natural resources, fish and wildlife, the chair of the department of environmental health of the University of Washington, a pesticide coordinator and specialist of the coorperative extenxsion at Washington State University, a representative from the Washington Poison Center, a practicing toxicologist and a member of the general public. 17. Federal or other mandates: 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: 					
None			None		
19. Certification: I hereby certify via electron	ic submittal that the abo	ove information is co	omplete and correct to	the best of my knowledge.	
Barbara Morrissey, Acting Manager			mpia WA 98504-7825		
Name and Title	Date	Address		Phone	

Pharmacy & Therapeutics Committ	ee	N/A			
Board/Commission Name (B/C)		2. Namo	e B/C reported under in 2001 or l	Jnchanged ☐	
Health Care Authority		2003	10	0	
3. Agency to which B/C reports	4. Year B establi		Number of members	Number of meetings last biennium	
 Summary: Primary Responsibilities: To develop a statewide, independent, evidence and education council for DSHS Medical Assistanted Operating Costs (Boards/Commissions Only) 	ce-based preferred drug list t stance Administration Total Costs	8) Ente	Sources of Fun r fund sources, e.g., G.F. State, S unt, etc.	ids State Building Code	
2001-2003 Biennium Actual	N/A	2) "A" if N/A	appropriated or "N" if non-appro	opriated	
2003-2005 Biennium Estimate	\$53,750		vices Account, Health Care Auth I, Medical Aid - A	nority Aministration Account,	
9. Expected consequences if Board/Comm transferred to another agency (specify), or		d responsibili	ities: a) were assigned to existing	g/additional staff, b) were	
a) Existing staff is not available to establish a statewide, preferred drug list that would create the prescription drug expenditure savings anticipated. Hiring additional staff would not be cost effective b) A transfer to DSHS would delay implementation of a statewide preferred drug list until at least FY '05 and result in the loss of anticipated prescription drug expenditure savings and loss of federal list until at least FY '05 and result in the loss of anticipated prescription drug expenditure savings for the '03-'05 biennium					
10. Legal authorization: State Constitution	Article, RCW, WAC or EO)	11. Legal Authorization is:		
Senate Bill 6088 section 9; Chapter 29 I Special Session	Laws of 2003, 58th Legislati	ure , 1st	Specific □ General		
12. Appointing Authority: Administrator, He Department of Social & Health Services; Direct			13. Is Senate confirmation red ☐ Yes ☒ No	quired?	
14. Does Board/Commission have subpoe	na powers?		15. Board/Commission member compensation class		
☐ Yes ☒ No			one two three four		
16. Required Representation: Ten members that meet the requirements of T of expertise that have recognized expertise in drugs, drug use review, medical quality assurabut no more than 51% of the board respective company, or a state agency administering stat 17. Federal or other mandates:	one or more of the following ance, disease state manage ly. No member can be emp te purchased health care pro	clinically app ment, or evide loyed by a pha	ropriate prescribing, dispensing, an enced-based medicine. These clinic armaceutical manufacturer, a pharm 18. Other existing organization could satisfy the mandate	nd monitoring of covered outpatient cians must make up at least 31%, macy benefits management one state, local or private, which	
Title XIX of the Federal Social Security A	Act		DSHS		
19. Certification: <i>I hereby certify via electro</i> Pete Cutler, Acting Administrator Health Care Authority	7/25/2003 P	O Box 42700,	is complete and correct to the be Olympia, WA 98504-2700	(360) 923-2828	
Name and Title	Date A	ddress		Phone	

Board of Pharmacy					
1. Board/Commission Name (B/C)		2. Name B/C rep	orted under in 2001 o	r Unchanged 🗵	
Washington State Department of Health		1891 7 18			
3. Agency to which B/C reports	4. Year B/ establis		5. Number of members	6. Number of meetings last biennium	
7. Summary: Primary Responsibilities: A) Regulate the practice of pharmacy and enformed the qualifications for licensure of pharmacists as Issue subpoenas and administer oaths for hear pharmacy. G) Make rules for the dispensing, of or pharmacists. I) Suggest strategies to prevent misuse, and diversion. J) Monitor trends of dru	and pharmacy interns. D) Corrings or disciplinary proceed istribution, sale and manufut and reduce drug abuse, r	onduct hearings to revo dings. F) Assist state ag facturing of drugs. H) Ad misuse, and diversion	ke or suspend licenses encies in enforcing all lopt rules governing co	s, permits, or other credentials. E) laws pertaining to drugs and ontinuing education requirements	
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	1) Enter fund so Account, etc.	Sources of Fources, e.g., G.F. State	unds e, State Building Code	
			ated or "N" if non-app	propriated	
2001-2003 Biennium Actual	\$57,274	1) Health Profession 2) A	ns Account		
2003-2005 Biennium Estimate	\$58,992	1) Health Profession 2) A	ns Account		
	9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.				
a) The impact of losing board direct technical input and cooperative working relationships with staff would be increased staff time at the expense of other priority areas, need to pay for technical expertise not available on staff, increased time to reach decisions, more time required of stakeholders for their participation, and the possibility that rural and less represented areas may lose their voice in agency decisions. b) Professional knowledge and expertise would be lost. Most likely agency is the Department of Licensing unqualified practitioners. c) The responsibilities are necessary to protect the public from incompetent or unqualified practitioners.					
10. Legal authorization: State Constitution RCW 18.6412. Appointing Authority: Governor	Article, RCW, WAC or EO	⊠ Spe	gal Authorization is: ecific	raquirad?	
12. Appointing Authority. Governor		⊠ Yes	s □ No		
14. Does Board/Commission have subpoen☑ Yes ☐ No	a powers?	15. Bo □ one		mber compensation class ☐ four	
 16. Required Representation: 7 members 5 who are licensed pharmacists as in Washington for 5 years and be representativ 17. Federal or other mandates: None 		nd geographically repre 18. Oth co	sentative of the State. Her existing organizat	members must have been licensed ions state, local or private, which ates listed in number 17:	
19. Certification:					
I hereby certify via electronic	submittal that the above in	nformation is complete	and correct to the be	st of my knowledge.	
Steven D. Hodgson, Program Manager		O Box 47863, Olympia,	WA 98504-7863	360-236-4825	
Name and Title	Date A	ddress		Phone	

Board of Physical Therapy					
1. Board/Commission Name (B/C)		2. Name B/C report	e B/C reported under in 2001 or Unchanged 🖂		
Washington State Department of Health		1949	5	6	
3. Agency to which B/C reports	4. Year B establi		. Number of members	6. Number of meetings last biennium	
7. Summary: Primary Responsibilities: Protection of the public from incompetent and ustandards, examination requirements and stakeholder and licensee education.					
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs				
2001-2003 Biennium Actual	\$24,000	1) Health Professions 2) A		•	
2003-2005 Biennium Estimate	\$36,000	1) Health Professions 2) A	Account		
9. Expected consequences if Board/Commi transferred to another agency (specify), or o		d responsibilities: a) wer	e assigned to existinq	g/additional staff, b) were	
a) The impact of losing board direct technical input and cooperative working relationships with staff would be increased staff time at the expense of other priority areas, need to pay for technical expertise not available on staff, increased time to reach decisions, more time required of stakeholders for their participation, and the possibility that rural and less represented areas may lose their voice in agency decisions.		wledge and expertise wou ely agency is the Departme	ent protect th	onsibilities are necessary to he public from incompetent or ed practitioners.	
10. Legal authorization: State Constitution	Article, RCW, WAC or EO	11. Lega	I Authorization is:		
RCW 18.74		⊠ Speci	ific 🗌 General		
12. Appointing Authority: Governor			nate confirmation red	quired?	
14. Does Board/Commission have subpoen ☐ Yes ☐ No	a powers?		d/Commission memb ☐ two ☐ three ☑	er compensation class four	
16. Required Representation:					
Four physical therapists and one consumer me 17. Federal or other mandates: None	mber.	18. Other coul Non	d satisfy the mandate	ns state, local or private, which es listed in number 17:	
19. Certification: <i>I hereby certify via electron</i>	nic submittal that the above	e information is complete	and correct to the be	st of my knowledge.	
Kris Waidely, Health Services Consultant	7/14/03 P	O Box 47868, Olympia, W	A 98504	(360) 236-4847	
Name and Title		ddress		Phone	

Board of Trustees, Community Coll Pierce Colleges	ege District # 11 -					
Board/Commission Name (B/C)	2. Name B	/C reported under in 2001 or	Unchanged 🖂			
Same		1967	5	20 regular		
3. Agency to which B/C reports		r B/C was Iblished	Number of members	Number of meetings last biennium		
7. Summary: Primary Responsibilities: 1)Operate college within district. 2) create comprehensive programs of college education and training. 3) Establish policy, provide for long - and short-range planning. 4) Employ college president. 5) Establish new facilities. 6) Establish self-supporting facilities. 7) Establish fees and charges. 8) Grant degrees and diplomas. 9) Enforce rules and regulations perscribed by State Board for Community and Technical Colleges.						
8. Estimated Operating Costs (Boards/Commissions Only)	Total Sources of Funds Costs 11) Enter fund sources, e.g., G.F. State, State Building Account, etc.					
			propriated or "N" if non-appr	opriated		
2001-2003 Biennium Actual	75,207	General Fund	I State			
		A				
2003-2005 Biennium Estimate	66,000	General Fund	I State			
		Α				
9. Expected consequences if Board/Comm transferred to another agency (specify), or		and responsibilitie	s: a) were assigned to existin	g/additional staff, b) were		
a) citizen representation and oversight in the governance of public community colleges would be eliminated, as well as accountability to community.	b) Same as a		c) Same a	s a		
10. Legal authorization: State Constitution	Article, RCW, WAC or	EO .	11. Legal Authorization is:			
RCW 28B.50.100			⊠ Specific ☐ General			
12. Appointing Authority: Governor			13. Is Senate confirmation re	firmation required?		
			⊠ Yes □ No			
14. Does Board/Commission have subpoer	na powers?		15. Board/Commission member compensation class			
☐ Yes ☒ No			one two three four			
16. Required Representation:						
Geographical diversity within the college's distr	rict; representation by lab	oor, business, wome	en and racial and ethnic minoriti	es.		
17. Federal or other mandates:		1	Other existing organization could satisfy the mandal	ons state, local or private, which		
None	Maria					
19. Certification: <i>I hereby certify via electron</i>	nic submittal that the ab	ove information is	complete and correct to the be	est of my knowledge.		
Ruth Ann Hatchett	7-29-03	1601 39th Ave SE,	Puyallup WA 98374	253-840-8495		
Name and Title	Date	Address	·	Phone		

Pierce County Community Justice C Board	enter Oversight				
1. Board/Commission Name (B/C)		2. Name B/C	C reported under in 2001 or	Unchanged ⊠	
Department of Corrections	2000	15	31		
3. Agency to which B/C reports		nr B/C was ablished	5. Number of members	6. Number of meetings last biennium	
7. Summary: Primary Responsibilities: The Pierce County Community Justice Center C key in garnering community support during the programming.					
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Account,	Sources of Fund sources, e.g., G.F. State, etc. ropriated or "N" if non-appr	State Building Code	
2001-2003 Biennium Actual	-0-				
2003-2005 Biennium Estimate	-0-				
9. Expected consequences if Board/Commistransferred to another agency (specify), or c)) were dropped.	·	•		
a) No similar resources avaiable	b) No similar res	sources available	c) The boa serves.	ard is critical to the community it	
10. Legal authorization: State Constitution A	Article, RCW, WAC or	EO 11	I. Legal Authorization is:		
RCW 72.09.050 (Secretary's Authority)			☐ Specific ⊠ General		
12. Appointing Authority: Secretary, Departm	ent of Corrections	13	3. Is Senate confirmation re	quired?	
			☐ Yes ☒ No		
14. Does Board/Commission have subpoen	a powers?	15	5. Board/Commission mem	ber compensation class	
☐ Yes ⊠ No			one 🗌 two 🗌 three 🗀] four	
16. Required Representation:					
Members include representatives from the T	acoma community, bu	siness, social services	s, clergy and the Department of	of Corrections.	
17. Federal or other mandates: None.		18	. Other existing organizatic could satisfy the mandal None.	ons state, local or private, which tes listed in number 17:	
19. Certification: <i>I hereby certify via electroni</i>	ic submittal that the al	bove information is co	omplete and correct to the be	est of my knowledge.	
Patria N. Robinson-Marton		Post Office Box 411			
Chief of Staff Name and Title	07/23/2003 Dat e	Olympia, Washingto Address	n 98504-1101	360-753-0896 Phon e	

Pilotage Commissioners, Board of				
1. Board/Commission Name (B/C)		2. Name B/C rep	orted under in 2001 or Unch	nanged 🗵
Cama		1935	9	19
Same 3. Agency to which B/C reports	4. Year		5. Number of	6. Number of meetings
		lished	members	last biennium
7. Summary: Primary Responsibilities:	ata licancad piloto in fulfil	ling the intent of the Dile	stage Act DCW 99 14 and	to provent the loss of lives
To assure the adequacy and competency of st loss of property and vessels and to protect the 1. Administering state pilot licensing examina 2. Issuing state pilot licenses for the safe and 3. Monitoring pilot and shipping industry adhe 4. Maintaining programs of continuing training management. 5. Setting pilotage tariffs. 6. Developing and encouraging waterborne occompetitor.	marine environment of thations. I competent navigation of the state pilotage and education for all pilotage.	ne State of Washington of f marine vessels in Was ge law and conducting d ots concerning vessel n	through the sound applicat hington state waters. isciplinary actions if neces avigation, radar certificatio	ion of compulsory pilotage by: sary. n and bridge resource
8. Estimated Operating Costs	Total Costs	12) Enter fund co	Sources of Fun	
(Boards/Commissions Only)	Costs	Account, etc.	ources, e.g., G.F. State, State ated or "N" if non-appropria	· ·
2001-2003 Biennium Actual	\$220,000	Pilotage Account "A"	<u>мес от ти птоп-арргорна</u>	ieu
2003-2005 Biennium Estimate	\$310,000	Pilotage Account "A"		
9. Expected consequences if Board/Commission agency (specify), or c) were dropped.	were abolished and respo	onsibilities: a) were assig	ned to existing/additional s	taff, b) were transferred to another
a) Elimination of diverse representation of maritime industry needs and concerns.	pilotage and its	us and emphasis on saf s role in enhancing mari vigable waters by qualif rts.	ne moveme	urance of safe and efficient ent of vessels, cargo and people the oversight of state pilotage law nce.
10. Legal authorization: State Constitution Article RCW 88.16 and WAC 363-116		11. L	egal Authorization is: becific General	
12. Appointing Authority : Governor (7) Statute	(2) RCW 88.16.010		Senate confirmation requires No	red?
14. Does Board/Commission have subpoena pov ☐ Yes ☐ No	vers?		foard/Commission member ne two three f	
16. Required Representation: One active licensed Puget Sound Pilotage I One active licensed Grays Harbor Pilotage I One American shipping industry person One foreign shipping industry person One marine water environmentalist Two public at large with broad experience re Administrator of the Office of Marine Safety Assistant Secretary for Marine Transportation	District pilot elated to the maritime ind (or designee) [now withir	n the Department of Eco		
17. Federal or other mandates: None			ther existing organizations s satisfy the mandates listed None	state, local or private, which could in number 17:
19. Certification: I hereby certify via electronic sub	omittal that the above inform	mation is complete and co	rrect to the best of my knowl	ledge.
Peggy Larson, Administrator	7-24-03	2911 Second Avenue,	Seattle, WA 98121	206-515-3904 Phone
NAME AND THE	LIMIE	AUULESS.		PUND

Advisory Board of Plumbers				
1. Board/Commission Name (B/C) 2. Name B/C reported under in 2001 or Unchanged ☐				
Department of Labor and Industries		1973	5	8
3. Agency to which B/C reports	4. Yea	r B/C was ablished	5. Number of members	6. Number of meetings last biennium
7. Summary: Primary Responsibilities: To advise the Director of the Department of La the RCWs and WAC rules. Also, to advise the				g/reviewing proposed changes to
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Account	Sources of Fund sources, e.g., G.F. State, etc. propriated or "N" if non-app	State Building Code
2001-2003 Biennium Actual	\$4,000	Plumber Certi	fication Fund	
2003-2005 Biennium Estimate	\$5,000	Plumber Certi	fication Fund	
9. Expected consequences if Board/Comm transferred to another agency (specify), or of the contract of the cont		and responsibilities	s: a) were assigned to existi	ng/additional staff, b) were
a) The vital link and input from the plumbing industry would be lost. If the board were abolished there would no longer be a forum where the plumbing industry could communicate recommendations and issues impacting plumbers.		ent certifies plumbers d quarterly to discuss he industry.	s issues that our cus to the la associa addition that the	partment would lose a critical link to stomers in communicating changes aws, policies, and practices ated with the plumbing industry. In n, suspension or revocation requires e individual have the option to , and request a hearing before the
10. Legal authorization: State Constitution RCW 18.106.11012. Appointing Authority: Governor	Article, RCW, WAC or		11. Legal Authorization is: Specific ☐ General 13. Is Senate confirmation re ☐ Yes ☐ No	equired?
14. Does Board/Commission have subpoer ☐ Yes ☒ No	na powers?		5. Board/Commission mem	nber compensation class
16. Required Representation: One public member, two general journeym 17. Federal or other mandates: none	an plumbers, two owner	rs of plumbing busine	esses.	ons state, local or private, which
19. Certification:				
I hereby certify via electronic	submittal that the abo	ve information is co	mplete and correct to the bes	st of my knowledge.
Peter Schmidt, Chief Contractor Registration/Plumber Certification/Factory Assembled Structures	7/16/03	Department of Lab Speciality Complia PO Box 44470 Olympia, WA 9850	nce Services/Plumber Certific	360.902.5571 ation
Name and Title	Date	Address		Phone

Podiatric Medical Board				
1. Board/Commission Name (B/C)		2. Name B/C reporte	d under in 2001 or Un	changed 🛚
Washington State Department of Health		1917	5	10
3. Agency to which B/C reports	4. Year B establi		Number of members	6. Number of meetings last biennium
7. Summary: Primary Responsibilities: Approves and administers examinations; de suspends or revokes licenses to practice. Adrestablishing standards of professional conduct mental or physical condition. Acts as adjudica	ninisters continuing educati Conducts investigations of	on requirements for continu of allegations of unprofessio	ed licensure. Adopts ru nal conduct or practicing	les and/or guidelines g while impaired with a
8. Estimated Operating Costs	Total		Sources of Funds	
(Boards/Commissions Only)	Costs	15) Enter fund source	es, e.g., G.F. State, Sta	te Building Code
		Account, etc. 2) "A" if appropriated	d or "N" if non-approp	riated
2001-2003 Biennium Actual	\$10,000	1) Health Professions A 2) A		
2003-2005 Biennium Estimate	\$10,500	1) Health Professions A 2) A	Account	
9. Expected consequences if Board/Comm transferred to another agency (specify), or of		d responsibilities: a) were	assigned to existing/a	dditional staff, b) were
a) The impact of losing board direct technical input and cooperative working relationships with staff would be increased staff time at the expense of other priority areas, need to pay for technical expertise not available on staff, increased time to reach decisions, more time required of stakeholders for their participation, and the possibility that rural and less represented areas may lose their voice in agency decisions.		wledge and expertise would ely agency is the Departmer	nt protect the	sibilities are necessary to public from incompetent or practitioners.
10. Legal authorization: State Constitution	Article, RCW, WAC or EO	11. Legal	Authorization is:	
18.22 RCW		Specifi	ic 🗌 General	
12. Appointing Authority: Governor		☐ Yes ▷		
14. Does Board/Commission have subpoer ☐ Yes ☐ No	na powers?		/Commission member ☐ two ☐ three ☐ fo	
16. Required Representation: All members shall be residents of the state or providing health services. Four membe preceding appointment.17. Federal or other mandates: None		ans and surgeons who have	e been licensed for at lea existing organizations satisfy the mandates	ast five years immediately state, local or private, which
19. Certification: <i>I hereby certify via electron</i>	nic submittal that the abov	e information is complete a	and correct to the best	of my knowledge.
Arlene Robertson, Program Manager	7/11/03 P	O Box 47869, Olympia, WA	98504-7869	360-236-4945
Name and Title		ddress		Phone

Pollution Control Hearings Board				
Board/Commission Name (B/C)		2. Name B/C reported	d under in 2001 or Unch	anged 🗵
Environmental Hearings Office		1970	3	416
3. Agency to which B/C reports	4. Year l estab	B/C was 5 Ilished	Number of members	Number of meetings last biennium
7. Summary: Primary Responsibilities: The Pollution Control Hearings Board is an inc Ecology, air pollution control boards or authori Procedures Act.	dependent quasi-judicial a ties, and on some flood co	gency which hears appeals ontrol and solid waste decisi	from decisions and ord ions, all in accordance	ders of the Department of with the Administrative
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	16) Enter fund source Account, etc. 2) "A" if appropriated	Sources of Funces, e.g., G.F. State, State or "N" if non-appropriat	Building Code
2001-2003 Biennium Actual	\$1,297,140	A - State General Fund		
2003-2005 Biennium Estimate	\$1,429,740	A - State General Fund		
 9. Expected consequences if Board/Commission agency (specify), or c) were dropped. a) There would be no staff if the group were abolished. 10. Legal authorization: State Constitution Artic RCW 43.21B.010 	b) If functions train authorities, hear regulator hearing activity. The Dexpert staff to a	nsferred to Ecology and the arings process would have t ng appeals of its enforceme lept. would require additional assume this function. 11. Legal	air c) Appeals he courts re nt Uneven al througho unavaila body. Authorization is:	s would go to various superior esulting in added costs and delays. treatment of similar actions out the state would result due to ability of expertise of the hearings
12. Appointing Authority: Governor		13. Is Ser	nate confirmation requir	ed?
14. Does Board/Commission have subpoena po	wers?	15. Board	d/Commission member of	compensation class
⊠ Yes □ No		one	two three f	our
16. Required Representation: Three persons qualified by training or experier	nce in pertinent matters pe	ertaining to the environment,	at least one of whom ı	must be a lawyer.
17. Federal or other mandates: None			sfy the mandates listed i	state, local or private, which could in number 17:
19. Certification:				
I hereby certify via electr	ronic submittal that the abov	ve information is complete and	correct to the best of my	y knowledge.
William H. Lynch, Director	7/15/03	PO Box 40903, Lacey, WA	98504-0903	(360) 459-6327
Name and Title	Date	Address	* *	Phone

Washington State Potato Commiss	ion					
Board/Commission Name (B/C)		2. Name B/C r	B/C reported under in 2001 or Unchanged 🖂			
Department of Agriculture		1956	13	8		
3. Agency to which B/C reports	4. Year B/ establis		5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Responsibilities: Collect assessments, develop advertising prog programs, improve grades and standards, and funds for these purposes.						
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Sources of Funds 17) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.				
2001-2003 Biennium Actual	\$344,723	2) "A" if appro Producer assess	priated or "N" if non-approp ments/N	oriated		
2001 2000 Distribution Notice	Ψ0 11/120	1100000100000	on.s/ii			
2003-2005 Biennium Estimate	\$387,859	Producer assess	ments/N			
Expected consequences if Board/Committransferred to another agency (specify), or committee to the second control of the second	i ssion were abolished and c) were dropped.	। I responsibilities: a) were assigned to existing/	additional staff, b) were		
a) Producer support and involvement would decline.	b) This is an agricul be transferred.	tural program and sh	activities v income, re	f research and market access would decline affecting producer esearch efforts and the economic the industry in Washington.		
10. Legal authorization: State Constitution	Article, RCW, WAC or EO	11.	Legal Authorization is:			
RCW 15.66 and WAC 16-516			Specific General			
12. Appointing Authority: 9 elected by affect		by elected 13.	Is Senate confirmation requ	uired?		
producer members, 1 appointed by the Director	r of Agriculture		Yes 🛛 No			
14. Does Board/Commission have subpoen	a powers?	15.	Board/Commission membe	r compensation class		
☐ Yes ☒ No			one ⊠ two □ three □ f	our		
16. Required Representation:						
Commercial potato producers in Washington S Washington; four appointed by the elected mer						
17. Federal or other mandates: None		18. (Other existing organizations could satisfy the mandates None	s state, local or private, which s listed in number 17:		
19. Certification:						
I hereby certify via electronic	submittal that the above in	nformation is compl	lete and correct to the best o	f my knowledge.		
Kimberly C. Anderson, Accounts Payable Manager	8/26/03 10	08 Interlake Rd. Mos	ses Lake, WA 98837	(509) 765-8845		
Name and Title	Date A	ddress		Phone		

Private School Advisory Committee	:						
1. Board/Commission Name (B/C)		2.	Name B/C reported under in	me B/C reported under in 2001 or Unchanged 🖂			
OSPI		1974	15	5			
3. Agency to which B/C reports		4. Year B/C was established	5. Number o members				
7. Summary: Primary Responsibilities: The Committee advises the Superintendent of schools especially those relating to approval a results of any studies or tasks assigned to the	nd accreditation	of private schools.					
8. Estimated Operating Costs (Boards/Commissions Only)	Tota Cost	s 18)		es of Funds F. State, State Building Code non-appropriated			
2001-2003 Biennium Actual	\$1,500	G.F. S					
2003-2005 Biennium Estimate	\$2,000	G.F. S	tate/A				
9. Expected consequences if Board/Comm transferred to another agency (specify), or a a) Staff would have to be increased to include participation & perspective of the private school experience	c) were dropped		sibilities: a) were assigned (to existing/additional staff, b) were The Committee provides an opportunity for private schools to have access to the Superintendent on matters which impact them. It facilitates communication and cooperation.			
10. Legal authorization: State Constitution	Article, RCW, V	VAC or EO	11. Legal Authorizat	ion is:			
RCW 28A.195.050			Specific Gene	eral			
12. Appointing Authority: Superintendent of	Public Instructio	n	13. Is Senate confirm	nation required?			
			☐ Yes ⊠ No				
14. Does Board/Commission have subpoer	na powers?		15. Board/Commissi	ion member compensation class			
☐ Yes ⊠ No			⊠ one ☐ two ☐	three 🗌 four			
16. Required Representation:Broadly representative of educators, legislators17. Federal or other mandates:None	s, and various pr	ivate school groups	18. Other existing or	ganizations state, local or private, which e mandates listed in number 17:			
19. Certification:							
I hereby certify via electronic	submittal that t	the above information	on is complete and correct to	o the best of my knowledge.			
Marcia L. Riggers Assistant Superintendent Student Support and Operations	7/16/03		/200 VA 98504-7200	360-725-6175			
Name and Title	Date	Address		Phone			

Productivity Board					
Board/Commission Name (B/C)		2. Name	B/C reported under in	2001 or Unch	anged 🗵
Office of the Secretary of State		1982	10		23
3. Agency to which B/C reports	4. Year B establi		5. Number o members	f	6. Number of meetings last biennium
7. Summary: Primary Responsibilities: 1. To provide Washington State agencies and operations and processes. 2. To improve the saving and revenue generating employee sugreluable contributions to savings and generating and neutral process for the implementation of productivity, improve safety and enhance cust Teamwork Incentive Program; and 3) Public S	e efficiency and effectivener gestions and innovations. ng state funds, enhancing p employees' creative sugger omer service. To administe	ss of service de 3. To recognize public service, in stions and innoversions	livery of agencies and in e and reward agencies, increasing productivity an vations to save and gene	stitutions throunstitutions and improving sate state fund	igh implementation of cost state employees for their afety. 4. To provide a fair its, improve efficiency and
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Accou	Source fund sources, e.g., G.F. int, etc. appropriated or "N" if r		-
2001-2003 Biennium Actual	\$616,695	Personnel S		оп арргорпа	icu
		Revolving F	Fund / A		
2003-2005 Biennium Estimate	\$595,034	Personnel S	Services		
		Revolving F	und / A		
 9. Expected consequences if Board/Comm transferred to another agency (specify), or a a) Loss of effectiveness, credibility, and impartiality of programs. 	c) were dropped.b) Increased costs effectiveness, de	to administer, c	lecreased c)	The state wor savings and r	uld dramatically lose cost evenue generated from
	decreased credi	•			ggestions and team projects.
10. Legal authorization: State Constitution)	11. Legal Authorizati		
RCW 41.60; WAC 383-06; & WAC 383-0)7		Specific Gene	ral	
12. Appointing Authority: Governor, Lt. Gov	vernor, & Speaker of the Ho	use	13. Is Senate confirm	nation require	d?
			☐ Yes ⊠ No		
14. Does Board/Commission have subpoer	na powers?		15. Board/Commission	on member co	ompensation class
☐ Yes ⊠ No			☐ one ☐ two ☒ t	hree 🗌 four	
16. Required Representation: The Secretary of State; Director or Designee of the Dept. of General Administration; 3 - experier representing agency/institution under RCW 28	enced in industry (private) i				
17. Federal or other mandates:			18. Other existing org	janizations st	ate, local or private, which ted in number 17:
None			None	manaatos no	in individual in in
19. Certification:					
I hereby certify via electronic	submittal that the above	information is d	complete and correct to	the best of m	y knowledge.
Tracy Workman, Manager of the Productivity Board			Olympia WA 98504-024	4	360.704.5258
Name and Title (This person	Date A on assumes responsibility for	Address or accurate tran	smittal of the above info	mation.)	Phone

Professional Educator Standards Bo	oard				
1. Board/Commission Name (B/C)		2. Name B/C rep	orted under in 2001	or Unchanged 🖂	
Same		2000	20	12	
3. Agency to which B/C reports	4. Year B		5. Number of members	6. Number of meetings last biennium	
 Summary: Primary Responsibilities: Advise and provide recommendations to the of issues affecting certified education profess Rulemaking authority for basic skills and sub Oversee alternative routes to teacher certific Bring greater public focus and attention to po 	sionals. vject matter assessments to ation - partnership grant pr	o be required of all new rogram			
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Account, etc.	Sources of ources, e.g., G.F. Statisted or "N" if non-a	ate, State Building Code	
2001-2003 Biennium Actual	849,000	GF State A			
2003-2005 Biennium Estimate	\$832,000	GF State A			
9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.					
a) If OSPI took over the rulemaking and/or advisory functions currently held by the PESB, OSPI would have both policy making and implementation authority. This would negate the intent of the current law to have policy making held by practicing educators and citizens, and implemented by a state agency.	Educator Standards Board were previously under b, abolishing the PESB without transfer of authority would eliminate the current requirements that teachers pass. This would negate the intent rent law to have policy eld by practicing educators on the professions in Washington, and implemented by a Educator Standards Board were previously under b, abolishing the PESB without transfer of authority would eliminate the current requirements that teachers pass tests of basic skills and subject knowledge prior to certification and eliminate alternative route teacher certification programs in shortage areas.				
10. Legal authorization: State Constitution and RCW 28A.410.200-240; 28A.660; WAC 112. Appointing Authority: Governor	Article, RCW, WAC or EO 81	⊠ Sp 13. Is <u></u> Ye	egal Authorization is ecific ☐ General Senate confirmations s ☑ No	n required?	
14. Does Board/Commission have subpoen☐ Yes ☒ No	a powers?	15. Bo □ on		ember compensation class	
16. Required Representation: 7 public school teachers (4 of which must be no school principal, 2 representatives from public the program, 2 educational staff associates, 1 school Public Instruction is non-voting, ex-officion. 17. Federal or other mandates:	nigher education educator p	preparation programs, 1 1 classified instructional 18. Otl	private school teacher representative from employee, one pare	er, 2 public school principals, 1 private a private higher education preparation	
I hereby certify via electronic	submittal that the above i	information is complete	e and correct to the l	best of my knowledge.	
Jennifer Wallace, Executive Director Name and Title		Campus Mail # 47236		725-6275 Phon e	

Property and Liability Advisory Boa	ard	same						
Board/Commission Name (B/C)		2. Name B/	2. Name B/C reported under in 2001 or Unchanged					
Office of Financial Management		1992	5	8				
3. Agency to which B/C reports	4. Year B establi		Number of members	Number of meetings last biennium				
7. Summary: Primary Responsibilities: To assist the State Risk Manager in adopting programs covering liability and property risks.	rules and policy governing t	he operation and r	management of both individual	and joint self-insurance				
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Sources of Funds 21) Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 2) "A" if appropriated or "N" if non-appropriated						
2001-2003 Biennium Actual	1600		nent Admin. Account N					
2003-2005 Biennium Estimate	1600	Risk Managen	nent Admin. Account N					
 9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) Loss of formal local government input b) same as a) c) same as a) on program administration 								
10. Legal authorization: State Constitution	Article, RCW, WAC or EO) 1	1. Legal Authorization is:					
RCW 48.62.041			Specific General					
12. Appointing Authority: Governor		1	3. Is Senate confirmation re	quired?				
			☐ Yes ⊠ No					
14. Does Board/Commission have subpoe	na powers?	1	5. Board/Commission meml	ber compensation class				
☐ Yes ☒ No			one 🗌 two 🖂 three 🗀] four				
16. Required Representation:								
Two representatives from individual property a The fifth spot is not designated by statute.	and liability self-insurance pr	ograms, two repre	esentatives from joint property	or liability self-insurance programs.				
17. Federal or other mandates:		18	3. Other existing organization could satisfy the mandat	ons state, local or private, which				
none			none					
19. Certification:								
I hereby certify via electronic	c submittal that the above i	information is con	mplete and correct to the best	of my knowledge.				
John Nicholson Risk Management Coordinat		O Box 41027, Oly	mpia, WA 98504	360-902-7311				
Name and Title (This person		.ddress or accurate transm	ittal of the above information.)	Phone				

Examining Board of Psychology				
1. Board/Commission Name (B/C)		2. Name E	B/C reported under in 2001 or L	Jnchanged ⊠
Washington State Department of Health		1955	9	14
3. Agency to which B/C reports	4. Year E establ	B/C was lished	5. Number of members	6. Number of meetings last biennium
7. Summary: Primary Responsibilities: Adopt rules, examine the qualifications of appli discipline licensees, adopt a code of ethics for		ister licensing exa	mination, receive complaints of u	unprofessional conduct and
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Accoun	Sources of Fun und sources, e.g., G.F. State, S tt, etc. propriated or "N" if non-appro	State Building Code
2001-2003 Biennium Actual	\$55,646		fessions Account	•
2003-2005 Biennium Estimate	\$55,646		fessions Account	
9. Expected consequences if Board/Committransferred to another agency (specify), or or		, ,	es: a) were assigned to existing	g/additional staff, b) were
a) The impact of losing board direct technical input and cooperative working relationships with staff would be increased staff time at the expense of other priority areas, need to pay for technical expertise not available on staff, increased time to reach decisions, more time required of stakeholders for their participation, and the possibility that rural and less represented areas may lose their voice in agency decisions.		owledge and expe kely agency is the	Department protect the	consibilities are necessary to he public from incompetent or ed practitioners.
10. Legal authorization: State Constitution	Article, RCW, WAC or EC	0	11. Legal Authorization is:	
RCW 18.83/WAC246.924			Specific ☐ General	
12. Appointing Authority: Governor			13. Is Senate confirmation rec ☐ Yes ☑ No	quired?
14. Does Board/Commission have subpoen ☑ Yes ☐ No	na powers?		15. Board/Commission memb ☐ one ☐ two ☒ three ☐	•
16. Required Representation:				
Seven psychologists and two public members.				
17. Federal or other mandates:		•	 Other existing organization could satisfy the mandate 	ns state, local or private, which es listed in number 17:
None			None	-
19. Certification: I hereby certify via electron	nic submittal that the abov	ve information is	complete and correct to the be	st of my knowledge.
Janice K. Boden, Program Manager	7/21/03 F	PO Box 47869 Oly	ympia WA 98504-7869	360/236-4912
Name and Title	Date /	Address		Phone

Public Defense Advisory Committee	e, Office of			
1. Board/Commission Name (B/C)		2. Name	B/C reported under in 2001 or U	nchanged 🗵
Office of Public Defense		1996	11	8
3. Agency to which B/C reports	4. Year I estab	3/C was lished	5. Number of members	Number of meetings last biennium
7. Summary: Primary Responsibilities: To supervise and direct the director of the Offi Supreme Court for appointment and to fix the)). Also to subm	nit three OPD director candidates' n	names to the Washington State
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Accou	Sources of Fund fund sources, e.g., G.F. State, S unt, etc. appropriated or "N" if non-appro	tate Building Code
2001-2003 Biennium Actual	\$14,500		ty & Education Account	
2003-2005 Biennium Estimate	\$14,500	Public Safe	ty & Education Account	
9. Expected consequences if Board/Comm transferred to another agency (specify), or		nd responsibilit	ies: a) were assigned to existing	/additional staff, b) were
 The committee is advisory to the agency. 	b) No other agency appellate indige			of statute.
10. Legal authorization: State Constitution	Article, RCW, WAC or E0)	11. Legal Authorization is:	
RCW 2.70.030			Specific ☐ General	
12. Appointing Authority: Governor, Chief of the Senate, Speaker of the House of Repres Committee, Washington State Bar Association	sentatives, Court of Appea		13. Is Senate confirmation req ☐ Yes ☐ No	uired?
14. Does Board/Commission have subpoer	na powers?		15. Board/Commission member	er compensation class
☐ Yes ⊠ No			⊠ one ☐ two ☐ three ☐	four
16. Required Representation:				
Three persons appointed by the Chief Justice largest caucuses, appointed by the President cappointed by the Speaker of the House of Rep by the Washington State Bar Association. Dur pro bono basis; (b) serve as an appellate judge	of the Senate; two member resentatives; one person a ing the term of his or her a	s of the House appointed by the appoinment, no a	of Representatives, one from each Court of Appeals Executive Commappointee may: (a) provide indigen	of the two largest caucuses, nittee; and one person appointed t defense services except on a
17. Federal or other mandates:			18. Other existing organization could satisfy the mandate	s state, local or private, which s listed in number 17:
None			N/A	
19. Certification: I hereby certify via electron	ic submittal that the above	e information is	s complete and correct to the best	of my knowledge.
Joanne I. Moore, Director			Olympia, WA 98504-0957	(360) 956-2107
Name and Title	Date	Address		Phone

Public Deposit Protection Commiss	ion		Unchanged				
Board/Commission Name (B/C)			2. Name B/C	2. Name B/C reported under in 2001 or Unchanged			
Same			1969		3		7
3. Agency to which B/C reports		4. Year B/G establis		5.	Number of members	:	Number of meetings last biennium
7. Summary: Primary Responsibilities: Protecting public deposits in bank and thrift ins public depositaries and provides information to two collateral pools consisting of securities pled Monitors sufficiency of collateral pledged by purpoperating accounts and revenue collection acc	public treasur dged to the PD iblic depositari	ers. Provides PC through a es. Authorize	protection from los third party trustee s public treasurers	ss of pub e. Monito s to main	olic funds on rs public dep tain out-of-st	deposit in pu posit levels a tate and alie	ublic depositaries through s public depositaries. n bank accounts for use as
8. Estimated Operating Costs	To					s of Funds	
(Boards/Commissions Only)	Cos	sts	24) Enter fund Account, 6		es, e.g., G.F.	. State, Stat	e Building Code
			2) "A" if appro	opriated		on-appropri	iated
2001-2003 Biennium Actual	\$327,222		State Treasurer	Service	Fund A		
2003-2005 Biennium Estimate	\$333,615		State Treasurer	Service	Fund A		
9. Expected consequences if Board/Commi transferred to another agency (specify), or o			responsibilities:	a) were	assigned to	existing/ad	dditional staff, b) were
a) Elimination of the accountability to the state's highest elected officials.	mos		functions are and vue to be provided be Treasurer.				be no protection against loss posits other than FDIC
10. Legal authorization: State Constitution	Article, RCW,	WAC or EO	11.	. Legal	Authorizatio	on is:	
RCW 39.58 and WAC 389-12				•	c 🗌 Gener		
12. Appointing Authority: Refer to 16 below			13.	. Is Sen	ate confirm	ation requir	ed?
			☐ Yes ⊠ No				
14. Does Board/Commission have subpoen	a powers?		15.	. Board	/Commissio	n member o	compensation class
☐ Yes ☒ No				one [] two ⊠ th	nree 🗌 fou	ır
16. Required Representation:							
RCW 39.58.030) Treasurer, Chair Govern	or Lieutenai	nt Governor					
17. Federal or other mandates:			18.	Other o	existing org satisfy the	anizations s mandates li	state, local or private, which isted in number 17:
None				N/A	,		
19. Certification:							
I hereby certify via electronic	submittal tha	t the above in	nformation is comp	plete and	d correct to	the best of r	my knowledge.
Barton Potter, communications director	7-8-03	Ωf	fice of the State Tr	easurer	MS 40200		(360) 902-9033
Name and Title	Date		dress		5200		Phone

Public Disclosure Commission					
Board/Commission Name (B/C)	2. Name B/C repor	2. Name B/C reported under in 2001 or Unchanged ⊠			
Same	1973 5		22		
3. Agency to which B/C reports	4. Year I estab	B/C was lished	5. Number of members	Number of meetings last biennium	
7. Summary: Primary Responsibilities: Provide timely and meaningful public access to public officials and candidates, and to ensure of the control of the co				and the financial affairs of	
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs				
2001-2003 Biennium Actual	\$3,823,000	1) G.F. State 2) A	ou of the minimum appropriate	-	
2003-2005 Biennium Estimate	\$3,602,000	1) G.F. State 2) A			
Expected consequences if Board/Commission agency (specify), or c) were dropped.	n were abolished and respo	onsibilities: a) were assign	ed to existing/additional sta	ff, b) were transferred to another	
a) Agency would no longer be governed by a bipartisan board of citizen appointees.	State. The pub level of confide governed by or	torney General or Secret lic would not have the sal ence if the agency were under the control of an e ected officials are regulat	me finance in campaign decrease	c would lose access to campaign formation and enforcement of finance laws, which would confidence in the fairness of and governmental processes.	
10. Legal authorization: State Constitution Article	e, RCW, WAC or EO	11. Le	gal Authorization is:		
RCW 42.17			ecific 🗌 General		
12. Appointing Authority: Governor 13. Is Senate confirmation required? ☐ Yes ☐ No			d?		
14. Does Board/Commission have subpoena pov ☐ Yes ☐ No	wers?		ard/Commission member co e ☐ two ☐ three ☒ fo		
16. Required Representation:					
No more than 3 members may be identified wit	h the same political party				
17. Federal or other mandates: None		Sa	er existing organizations statisfy the mandates listed in I/A	ate, local or private, which could number 17:	
19. Certification:					
I hereby certify via electro	onic submittal that the abov	re information is complete a	and correct to the best of my	knowledge.	
Vicki Rippie, Executive Director		PO Box 40908 Olympia	WA 98504-0908	360-753-1111	
Name and Title	Date	Address		Phone	

Public Employees Benefits Board (F	PEBB)	Same			
1. Board/Commission Name (B/C) 2. Name B/C reported under in 2001 or Unchanged			01 or Unchanged ⊠		
Health Care Authority		1988	9	14	
3. Agency to which B/C reports		Year B/C was established	5. Number of members	6. Number of meetings last biennium	
7. Summary: Primary Responsibilities: Studies and provides direction to the Health Ca accidential death and dismemberment insurandependents; determines terms and conditions contributions for an employee and/or dependent approves employee benefit plans including cor retirees in managed health care systems. Rev through payroll deduction.	ce, and disability inc of employee particip nts in a manner that nprehensive health	come insurance or any pation and coverage; a encourages the use of care benefits for empl	y of, or combination of types and establishes eligibility crit of cost-efficient managed he loyees; attempts to achieve	of insurance for employees and their teria. Authorizes premium alth care systems. Designs and enrollment of all employees and	
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Accour	Sources of Funds Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 2) "A" if appropriated or "N" if non-appropriated		
2001-2003 Biennium Actual	\$13,119		istrative Fund - "A"	•	
2003-2005 Biennium Estimate	\$12,600	HCA Admini	istrative Fund - "A"		
9. Expected consequences if Board/Commitransferred to another agency (specify), or or a) The opportunity for input from representatives of employees and experts in the health benefits field would be reduced. Employee organization oversight of PEBB benefits, eligibility and premiums would be reduced.	c) were dropped.	onsibilities could not b	e transferred to c) If the work of the beautiful to the b	existing/additional staff, b) were the Board were abolished, the HCA bould make the decisions regarding enefits, eligibility and premiums in onjunction with OFM.	
10. Legal authorization: State Constitution	Article, RCW, WAC	C or EO	11. Legal Authorization	is:	
RCW 41.05.055; 41.05.065			Specific ☐ General		
12. Appointing Authority: Governor 13. Is Senate confirmation required? ☐ Yes ☒ No					
14. Does Board/Commission have subpoer	na powers?		15. Board/Commission	member compensation class	
☐ Yes ☒ No ☐ one ☐ two ☐ three ☒ four				ee 🛚 four	
16. Required Representation: Two representatives of state employees, one of classified employees, and one of whom is republic employees; two representatives of school retired, and represents an organized group of rand HCA administrator 17. Federal or other mandates: N/A	tired, is covered by ol district employees	a program under the j s, one of whom shall re	jurisdiction of the board, and epresent an association of so vith experience in health ben	I represents an organized group of retired chool employees and one of whom is nefit management and cost containment; ons state, local or private, which could	
19. Certification: I hereby certify via electron	nic submittal that th	e above information	is complete and correct to	the best of my knowledge.	
Pete Cutler, Acting Administrator Health Care Authority	7/25/03		Olympia, WA 98504-2700	(360) 923-2828	
Name and Title	Date	Address		Phone	

Public Employment Relations Comm	mission			
Board/Commission Name (B/C)		2. Name B/C report	ed under in 2001 or Un	changed 🖂
same		1975	3	22
3. Agency to which B/C reports	4. Year estab	B/C was 5. lished	Number of members	6. Number of meetings last biennium
7. Summary: Primary Responsibilities: The 3-person Commission body reserves to its agency are performed by the Executive Directors.	self a policy-making and a or and full-time staff of the	ppellate-review function. (The agency.	ne day-to-day dispute res	solution functions of the
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Account, etc.	Sources of Funds ces, e.g., G.F. State, Sta ed or "N" if non-approp	te Building Code
2001-2003 Biennium Actual	106,700	G. F. State A		
2003-2005 Biennium Estimate	72,000 72,000	G. F. State A Dept. of Personnel Ser	rvice A	
9. Expected consequences if Board/Comm transferred to another agency (specify), or of		nd responsibilities: a) were	e assigned to existing/a	ndditional staff, b) were
 Staff gets its authority by delegation from Commission, so abolition of group would abolish the agency. 		other agency would undo y under which PERC was	c) Eliminate d public sect	ispute resolution procedures for or.
10. Legal authorization: State Constitution	Article, RCW, WAC or E	O 11. Legal	Authorization is:	
RCW 41.58		Specing Specing	fic 🗌 General	
12. Appointing Authority: Governor		13. Is Sei	nate confirmation requi	red?
		⊠ Yes [□ No	
14. Does Board/Commission have subpoer	na powers?	15. Board	d/Commission member	compensation class
				ur
16. Required Representation:				
Persons knowledgeable in labor relations in the	e State of Washington			
17. Federal or other mandates:		18. Other could	existing organizations d satisfy the mandates	state, local or private, which listed in number 17:
none		none	•	
19. Certification: <i>I hereby certify via electron</i>	nic submittal that the abo	ve information is complete	and correct to the best	of my knowledge.
Jim Lohr	7/25/2003	P O Box 40919, Olympia, W	'A 98504-0919	(360) 570-7310
Name and Title		Address		Phone

Public Works Board				
1. Board/Commission Name (B/C)	2. Name B/0	C reported under in	2001 or Unchanged ⊠	
Community, Trade and Economic Developmen	t	1985	13	15
3. Agency to which B/C reports	4. Year B/o establis		5. Number o members	6. Number of meetings last biennium
7. Summary: Primary Responsibilities: Provide financial and technical assistance to lo storm water system, roads or streets, bridges,	ocal governments that are re or solid waste and recycling	habilitating or imp system.	proving their domestic	water system, sanitary sewer system,
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Sources of Funds 28) Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 2) "A" if appropriated or "N" if non-appropriated		
2001-2003 Biennium Actual	\$60,000	Public Works A	Assistance Account	A
2003-2005 Biennium Estimate	\$90,000	Public Works A	Assistance Account	A
Expected consequences if Board/Committransferred to another agency (specify), or committee to the second control of the second		responsibilities	: a) were assigned to	o existing/additional staff, b) were
a) The statewide perspective on the best use of resources and the input from key interest groups would be lost, forcing discussions about funding decisions to the legislative arena.	b) There is no other of information and If forced to transfe begin to emulate the parent agency issues with consti	d access that the lear, the program withe priorities and it, causing concert	board does. ill likely interests of	The responsibility for managing 1,300 active loans and over \$1.3 billion cannot be dropped. These loans will be active for 20 years and provision must be made to manage them.
10. Legal authorization: State Constitution	Article, RCW, WAC or EO	1	1. Legal Authorizati	on is:
RCW 43.155			Specific 🗌 Gene	ral
RCW 70.119A				
12. Appointing Authority: Governor		1:	3. Is Senate confirm	nation required?
16. Required Representation: 3 members must represent cities - two elected 3 members must represent counties - two elect 3 members must represent special purspose di 4 members (one of whom is appointed chair) m	ted officials and one public v istricts	vorks director]Yes ⊠ No	
17. Federal or other mandates:		18	could satisfy the	panizations state, local or private, which mandates listed in number 17:
none			na	
19. Certification:				
I hereby certify via electronic	submittal that the above in	nformation is con	nplete and correct to	the best of my knowledge.
John LaRocque, Executive Director Name and Title		O. Box 48319, Olyddress	ympia, Washington 9	8504 725-5010 Phone

Puget Sound Action Team/Puget Sound Council			Puget Sound Water Quality Action Team/Puget Sound Council			
Board/Commission Name (B/C) Office of the Governor		1996	B/C reported under in Action Tea Council	am: 18 : 12	Action Team: 2 Council: 8	
3. Agency to which B/C reports		B/C was olished	5. Number member		Number of meetings last biennium	
7. Summary: Primary Responsibilities: Coordinate state's efforts to protect and restorbudgets. Coordinates monitoring and research participation and seeks to broadly disseminate governments.	e Puget Sound. Prepares n programs. Periodically	s and coordinate amends the Pug	s implementation of the et Sound management	Puget Sound bien plan. Promotes ex	nial work plans and ktensive public	
8. Estimated Operating Costs	Total		Sour	ces of Funds		
(Boards/Commissions Only)	Costs		fund sources, e.g., G	.F. State, State B	uilding Code	
			unt, etc.	non appropriate	4	
2001-2003 Biennium Actual	\$9,704	2) "A" if Water Qual	appropriated or "N" if	поп-арргорнате	u	
2001-2003 Dielilium Actual	\$7,704	Appropriat				
2003-2005 Biennium Estimate	\$10,000	Water Qual				
		Appropriat				
9. Expected consequences if Board/Comm transferred to another agency (specify), or or		nd responsibili	ties: a) were assigned	to existing/addit	onal staff, b) were	
a) The Action Team and Puget Sound Council advise the chair and staff about key issues and actions, the effects of these upon each agency and interest groups, and integration with other initiatives, programs, and mandates. Action Team members have substantial influence on implementation of biennial work plans required by statute. Members of both groups also convey information about the Action Team and its work to their employees and constituencies. They are key partners in carrying out the Action Team's statutory duties and provide an efficient way to get feedback on implementation of those duties. Eliminating the Action Team and Council would significantly reduce customer invovement in planning and implementing actions to benefit Puget Sound's health.	address a broad broad range of s effective, the age independence at merged into ano Team's capacity issues would be shares the comp Team. It would I	n, as directed by st range of issues ar tate and local entitency and its staff med stature necessather state agency, to focus on that br lost, because no crehensive mission ikely lose the funds to accomplish its	nd work with a ies. To be nust have the ary to do so. If the Action of the Action of the Action ing, visibility, and mission.	would be no one shealth of all the bi quality of Puget S a slide in the wror environmental her current and anticip of the basin. Action state and federal agencies, levels or groups to reduce coordination, comprograms (e.g., promonitoring) and to issues affecting the Action Team and efficiencies of par	affect public welfare, there state program focused on the ological resources and water ound. A likely result would be ag direction in the Sound's alth-especially in the face of oated growth in the population on Team staff work across agencies, programs within f government, and community duplication, to improve munication and specific otection of shellfish; ambient of focus attention on critical e Sound. Terminating the Council would reduce ticipating entities.	
10. Legal authorization: State Constitution 90.71 RCW	Article, RCW, WAC or E	.0	11. Legal Authoriza ☑ Specific ☐ Gen			
12. Appointing Authority:			13. Is Senate confirmation required?			
Action Team: RCW 90.71.020(10), Gove		und Council:	☐ Yes ⊠ No			
Governor (7), Pres of Sen (2), Spk of Hou			1E Doord/Commiss	sian mambar aam	unancation aloca	
14. Does Board/Commission have subpoer☐ Yes ☒ No	ia powers?		15. Board/Commiss ⋈ one two two	three 🔲 four	ipensation class	
16. Required Representation:				unce 🗀 ioui		
Action Team: cities (1); counties (1); tribal	governments (1)					
Puget Sound Council: agriculture (1); business (1); enviornmental community (1); shellfish industry (1); counties (1); cities (1); and tribes (1).						
Appointments to the Council must reflect the geographical balance and diversity of population of the Sound.						
17. Federal or other mandates: The program is one of 28 National Estuary Programs in the United States and as could satisfy the mandates listed in number 17:						
The program is one of 28 National Estuary Programs in the United States and, as such, receives federal funding under Section 320 of the federal Clean Water Act. Could satisfy the mandates listed in number 17: None				a in number 17.		
19. Certification: <i>I hereby certify via electron</i>				ct to the best of m	v knowledae	
Brad Ack, Chair			Olympia, WA 98504-09		360-407-7302	
Name and Title	Date	Address	J 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		Phone	

Puget Sound Salmon Commission			Puget Sound Gillnet Salmon Commission			
1. Board/Commission Name (B/C) 2. Name B			B/C reported under in 2001 or Unchanged			
Department of Agriculture		1995 7 2				
3. Agency to which B/C reports		ear B/C was stablished	Number of members		Number of meetings last biennium	
7. Summary: Primary Responsibilities: To collect assessments, develop advertising a disburse funds for these purposes.	nd marketing program	s, provide marketin	g information to produce	rs, and		
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs					
2001-2003 Biennium Actual	\$6,736	Assessment on all commercially harvested Puget Sound gillnet salmon/N WSDA Grant Funds			et Sound gillnet	
2003-2005 Biennium Estimate	\$8,736	Assessment on all commercially harvested Puget Sound gillnet salmon/N WSDA Grant Funds				
9. Expected consequences if Board/Comm transferred to another agency (specify), or or		d and responsibili	ties: a) were assigned	to existing/add	litional staff, b) were	
 a) Producer support and involvement would decline. 	ement b) This is an agricultural program and should not be transferred. c) Funding of marketing activities would decline affecting producer income and the economic viability of the industry in Washington.					
10. Legal authorization: State Constitution	Article, RCW, WAC o	or EO	11. Legal Authorizat	ion is:		
RCW 15.65 and WAC 16-585			Specific Gene	eral		
12. Appointing Authority: 6 elected by affect Director of Agriculture	ted producers, 1 appoi	nted by the	13. Is Senate confirm ☐ Yes ☒ No	nation require	d?	
14. Does Board/Commission have subpoena powers? 15. Board/Commission member compensation class				ompensation class		
Yes □ No □ one ☑ two □ three □ four						
16. Required Representation: Seven members: 6 shall be affected producers the Department and the public	s and 1 member shall	be appointed by the	e Director of Agriculture r	epresenting		
17. Federal or other mandates: None			18. Other existing or could satisfy the None	ganizations st e mandates lis	ate, local or private, which ted in number 17:	
19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.						
David Harsila, Chairman	7/29/03	1900 W. Nicker 98119	son, Ste. 116, PMB 210,	Seattle, WA	(206) 595-8734	
Name and Title	Date	Address			Phone	